

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEES DETERMINATION | J | | 01-07-01 |
| O.I.P.E. CLASSIFIER | J | 32 | SP/ |
| FORMALITY REVIEW | MH | 920 | |
| RESPONSE FORMALITY REVIEW | LL | 907 | 06-27-01 |
| | | | 10-18-01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 5/15/01 |
| 2 | ✓ | ✓ | 5/15/01 |
| 3 | ✓ | ✓ | 5/15/01 |
| 4 | 0 | 0 | |
| 5 | ✓ | ✓ | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | 0 | ✓ | |
| 10 | - | ✓ | = |
| 11 | 1 | 1 | |
| 12 | 1 | 1 | |
| 13 | 1 | 1 | = |
| 14 | ✓ | | |
| 15 | 0 | | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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